

Attorney Docket Number:	EZP-100US
First Named Inventor:	Kurt Santayana
СОМІ	PLETE IF KNOWN
Application Number:	10/750,107
Filing Date:	December 31, 2003
Art Unit:	To Be Assigned
Examiner Name:	To Be Assigned

rining (St Ortic	1.10 (6))	ı			1
(37 CFR 1.63) required)	Examiner Name	: ТоВ	e Assigned	
I hereby declare that: Each inventor's residence, mailing a I believe the inventor(s) named belo sought on the invention entitled:	•			d and for which	a patent is
ELECTRONIC TOLL PASS DE\	/ICE HOLDER		,		
the specification of which	(Title	of the Invention)			
is attached hereto					
OR					
was filed on (MM/DD/YYY	Y) <u>December 31, 2003</u> as Unite	ed States Application or	r PCT International Ap	plication Numb	er <u>10/750,107.</u>
and was amended on (MM/DD/YYY identified specification, including the				the contents o	f the above
I acknowledge the duty to disclose in applications, material information what filing date of the continuation-in-part	nich became available between				
I hereby claim foreign priority benefit breeder's rights certificate(s), or 365 of America, listed below and have a rights certificate(s), or any PCT inter	(a) of any PCT international ap Iso identified below, by checkin	plication which designate the box, any foreign a	ited at least one count application for patent, i	ry other than the nventor's or pla	e United States nt breeder's
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	opy Attached? No
		·			
☐ Additional foreign application number	s are listed on a supplemental prior	ity data sheet attached he	reto.		



JUN 2 8 2004 E			PTC	0/SB/01. 02 & 04 COMBINED (08-03) AW	
ଦ୍ୱର କ୍ଷିଥିration/Pow		for Utility or E (continued)	esign P	atent Application	
I hereby appoint:					
Practitioners at Custon	ner Number <u>23122</u>				
OR Practitioner(s) named below	:				
No					
Name	Name		Registration Number		
as my/our attorney(s) or agent(s	s) to prosecute the applicati	on identified above, and	I to transact a	Il business in the United States	
Patent and Trademark Office con				· · · · · · · · · · · · · · · · · · ·	
Direct all correspondence to:	Practitioners Custom	ner Number listed above	· OR		
·	Correspondence Add				
Name:					
Address:					
Address.					
City:	State:		Zip:		
Country:	Telephone:		Fax:		
I hereby declare that all statement belief are believed to be true; and like so made are punishable by fi	d further that these statement ne or imprisonment, or both,	its were made with the k	nowledge that	willful false statements and the	
	——————————————————————————————————————	thereon.			
jeopardize the validity of the appl			been filed for	this unsigned inventor.	
jeopardize the validity of the appl	nventor:			this unsigned inventor.	
jeopardize the validity of the appl Name of Sole or First Ir	nventor: nd middle (if any))		Family Nam		
peopardize the validity of the applemental Name of Sole or First Ir Given Name (first ar	nventor: nd middle (if any))		Family Nam	ne or Surname	
Name of Sole or First Ir Given Name (first ar Kui Inventor's Signature	nventor: nd middle (if any))		Family Nam	ne or Surname tayana	
Name of Sole or First Ir Given Name (first ar Kur Inventor's Signature Residence: City: Luzerne	nventor: Ind middle (if any)) Int State: PA	☐ A Petition has	Family Nam	tayana Date: 4/17/04	
Name of Sole or First Ir Given Name (first ar Kur Inventor's Signature Residence: City: Luzerne	nventor: Ind middle (if any)) Int State: PA	☐ A Petition has	Family Nam	tayana Date: 4/17/04	